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FLUORIDATION: DO WE WANT IT? Documentation Thoroughly Discredits It MENACE TO HEALTH AND NEUTRALIZER OF MINDS

By John R. Lilliendahl, Jr., D.D.S. Stamford, Connecticut

Fluoridation is an attempt, by mass prophylaxis, to combat dental caries in human beings. One of several compounds, capable of producing fluoride in solution, is added to the public water supply in amounts sufficient to establish a fluoride ion concentration of 1 ppm, or thereabouts, depending on that concentration thought optimal for the area. Optimal values are varied from area to area, depending on mean temperature and sometimes season, to adjust for varying rates of water consumption for average individuals. Under usual conditions, the average individual is thought to ingest approximately 1 quart per day and the dosage of fluoride, 1 ppm, represents approximately 1 mg F in each quart. The attempt, therefore, is to get 1 mg F into each human, each day, and it is this amount that is regarded capable of reducing dental decay 65-70%. It is assumed that those in control will deliver water constantly containing optimal fluoride content. In the usage of any potent drug, it is the total dosage that is important. Total dosage here depends on the concentration of fluoride in the water and the amount of water drunk, assuming no other fluoride source. These figures of dosage are figured for the average consumer of water. Many humans, as we shall see, drink far from average amounts.

A pioneer proponent, Arnold, admitted (1): "First, it is not essential for fluorides to be continuously present in the diet for more than the first eight years of life in order that caries be inhibited. Secondly, the inhibitory action of fluorine may be dependent on the presence of optimal quantities in the diet during the formative period of the teeth, presumably increasing the fluoride content of the enamel and the dentin." In view of this, the insistence on any program necessitating a lifetime dosage, as in municipal water fluoridation, seems wasteful and unnecessarily hazardous.

Proponents deny that fluorides, as used in fluoridation, are drugs, since, in fluoridation, nobody is curing anything, but, by definition, drugs are substances used in the cure and prevention of disease. Fluorides do not improve water. Water is simply the carrier that delivers fluorides to people. Individuals, using fluoridated water, will themselves become fluoridated, regardless of need or desire. Proponents justify the empiricism inherent in water fluoridation, suggesting its safety has been proven by the extensive research that has been done. Necessarily, this research has been done in naturally fluoridated areas, and it fails to prove safety for naturally fluoridated waters, let alone those fluoridated artificially.

NONESSENTIALITY OF FLUORIDES

Maynard (3), Phillips (4) and Weddle & Muhler (5) find no evidence that fluorine, in any amount, is essential for good teeth.



SODIUM FLUORIDE powder goes into a hopper prior to being added to a city's water. Note mask to prevent inhaling deadly fumes.

Exner (6) states: "There is no such thing, medically, as fluorine deficiency." Maurer & Day (7) fed a highly purified, fluorine-poor diet to animals and could produce no signs of fluorine deficiency, not even tooth decay. Ramsyer (8) found that fluoride at 1 ppm did not prevent tooth decay in albino rats; rather, that fluoridated rats had more decay than the controls.

Decay-free teeth have been observed in areas with no fluorides in the water (9) (10). On the other hand, tooth decay has been observed to be rampant where nature has "adjusted" fluoride levels (11). Kania found teeth of New Britain children, after six years of fluoridation there, damaged beyond repair (12).

THE TOXICITY OF FLUORIDES

According to Comroe, Collins & Crame (13): "Fluorine is a much more potent poison than arsenic or lead." Largent (14) gives the lethal dose of sodium fluoride as about 4 g. Hodge & Smith (15) set it at 5-10 g. Roholm (16) and Gettler & Ellerbrook (17) show that it may run as low as 0.1 g. In fluoridation, we are not greatly concerned with the acute toxicity of fluorides, except to note the broadness of the range of estimations thereof, especially in view of the fact that sub-lethal amounts have similarly broad ranges of effect. Only proponents seem concerned with the number of bathtubs full of water, fluoridated or not, any human can drink.

The fatal dose of fluorine compounds varies widely even though all are extremely toxic. While fluoride ion is doubtless always the fluoride ion, its different source compounds do behave differently. According to "Industrial and Engineering Chemistry" (18), it takes 100 times more calcium fluoride to kill rats than sodium fluoride. The fluoride ion's behaviour depends on the kinds and amounts of other ions present in solution with it.

Kick, et al (19) and Lawrenz (20) found much higher retention of sodium fluoride than of calcium fluoride in rats. This is further evidence that "in vivo" behaviour of fluorides involves much more than the fluoride ion themselves.

McClure (21) attempted to establish that storage of fluoride does not occur at fluoridation levels. As a result of his balance studies, he concluded: "The elimination of absorbed fluorine via urine and sweat is practically complete when the quantities do not exceed 4.0 - 5.0 mg daily."

Armstrong, whose method McClure used in the fluoride determinations, added criticism, which also explains some of the errors in McClure's work. He said: "In my experience, the determination of fluorine in urine and feces is extremely difficult, if not impossible. The results are usually on the high side, more fluoride being found in the urine to which a definite amount of sodium fluoride has been added than is actually present. So, I have never been able to understand the results that McClure obtained which indicate the excretion of nearly 100% of the administered dose." (22)

McChure's conclusion has been refuted by nearly all others studying fluoride cumulation in the body. This has not, however, prevented proponents from quoting his statement to satisfy those questioning safety of fluoridation from a cumulative standpoint.

Hodge (23) finds that: "Skeletal deposition of fluoride is a continuing process in which a considerable portion of the ingested fluoride, perhaps a quarter, or as much as half, is deposited in the skeletin." In 1954, Hodge & Smith were of the opinion (15): "On the basis of present knowledge it is hard to see any hazard associated with the extra deposition of fluoride in the skeleton that will undoubtedly accompany water fluoridation." However, in conjunction with Steinberg & Gardiner, Hodge & Smith state (24): "Still unknown are the beneficial and ill effects that fluoridation of water may have on mankind."

EXPERTS SAY NO "SAFETY"

Wallace-Durbin, in her "tracer" studies, found over half of fluoride to be deposited in the skeletons of young rats, with older ones retaining slightly less. She declared: "Apparently there is no level of fluoride intake below which storage ceases and excretion is complete as was stated by Mc-Clure."

Rapp (26) noted retention of one half of absorbed fluorides, also observing, as did Greenwood, et al (27), storage elsewhere than in the skeleton: heart, brain, muscle, aorta, etc. He attested to fluorides exerting their poisoning effects at all levels of intake on enzymes, cells and calcifying tissues: "All cells are affected by fluoride... The extent of effect on a cell to be directly related to that cell's dependence on carbohydrate metabolism."

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FLUORIDATION

Continued from page 1

Galloway (28) affirmed: "It is well documented in scientific literature that the substance, sodium fluoride, has an effect on the metabolic cycle . . . The amount of dosage has very little to do with the question because it is a cumulative material—that is, it collects in the body."

Machle & Largent (29) found 60% retention of water-fed fluorides by the body while only about half this amount of foodfed fluorides were retained. At higher levels of fluoride intake (30) storage in bone appeared permanent, subsequent control periods being unattended by significant loss of fluoride. Interesting is the fact that heavy water drinkers could very easily duplicate the dosage represented by these levels (6 mg per day) under water fluoridation programs.

Gordanoff (8), of Switzerland, has this to say: "In several parts of our country, children receive tablets with fluorine, but the fluoridation of drinking water has not been accomplished. We trust it will not happen in view of the special circumstances here regarding our thyroid problem. Twenty years ago our population had many goiters—they have disappeared because of iodized salt. Research here demonstrates clearly an antagonism between iodine and fluorine. We also showed. in another experiment, that the calcium metabolism is greatly affected by fluorine. Since the bone picks up 30% less calcium in the presence of fluorine, the danger of osteoporosis in a growing organism is very great.

The erroneous nature of McClure's conclusion is especially important to establish because the major portion of harm due to fluorides results from their chronic-cumulative effects on all body cells. Since fluoride accumulates in the body at all levels of intake, it becomes important to reduce to a minimum the length of time it can accumlate. Obviously, we ought only be considering fluoride ingestion by humans during the period it might conceivably benefit themthe first eight years of life.

Theorell (88) says regarding the toxicity of fluoride. "As far as is known, the toxic effect of the fluorine ion is due solely to its inhibiting effect upon many enzyme systems. In assessing the role that these enzyme inhibitions may play, extreme caution is called for, as a large number of unknown factors enter here. The example of lipase inhibition by fluoride in such a small amount as 1 part in 5 million . . . may be taken as an illustration of this . . . Summarizing, it may be said that even if the risks from the viewpoint of enzyme chemistry connected with a water fluoridation up to 1 ppm should not be exaggerated, yet the distance to toxic doses is none the less so short as to justify some hesitation."

ALLERGIC TYPE REACTIONS

Allergic type reactions to fluorides, at fluoridation levels, have been reported by several investigators (31) (32) (33) (35) (8).

Feldman, speaking of his experiment in which humans received 1 mg sodium fluoride per day, by tablet, says: "One percent of 1100 cases presented evidence of undesirable side effects of fluoride therapy. Skin rashes, epigastric distress, varying from slight discomfort to bloody vomiting, were among the symtoms. It is pointed out that if fluoride is the allergen or intoxicant by the tablet method of administration, the source is readily removed by discontinuance of the therapy. This cannot be readily accomplished when communal water supplies are the source."

Arthur Ford, Former New York City Water Commissioner, was dead set against Fluoridation. Now Fluoridation has been railroaded through New York City over the protests of thousands of it's citizens, who wanted only an opportunity to vote on the acceptance of this mass medication poison!

Since children under eight, the only benefactors of fluoride ingestion, make up less than 10% of the total population, limiting fluoride dosage to them would materially reduce the allergic side reactions for the whole population from 1 to 0.1%. The feasibility of tablet programs is shown by their operation in Switzerland, Germany and else-

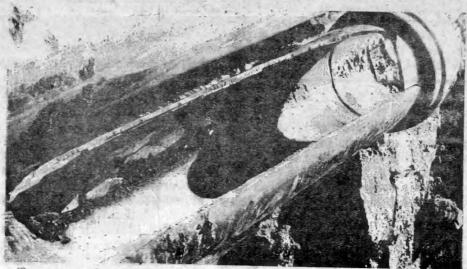
Stokinger & Woodward (36) give the water supply safety factor of fluoride as zero. The water supply safety factor of any substance is the highest number that can be safely used to multiply the concentration of that substance in water. Nesin (34) says that no substance should be introduced into any water supply if it has a safety factor lower than ten In Nesin's words (33): "Never in the history of water supply has a substance with so much unfavorable evidence been considered seriously for introduction into the potable water of communities. Regardless of the merits of fluoridation, sufficient evidence exists to exclude an indiscriminate vehicle as the public water supply for furthering a program designed to reduce the incidence of dental decay in children. The proposal becomes more appalling when it is realized that the proposed prophylaxis may be effected according to a more rational procedure which would avoid most of the hazards."

"SAFETY" OF FLUORIDATED WATER

We read in an editorial appearing in the Journal of the American Dental Association (37): "We do know that the use of drinking water containing as little as 1.2 to 3.0 parts per million fluorine will cause such developmental disturbances in bones as osteosclerosis, spondylosis and osteopetrosis, as well as goiter, and we cannot afford to run risk of producing such serious systemic disturbances in applying what is at present a doubtful procedure intended to prevent dental disfigurements among children. With regard to the safety margin in the fluorine content of drinking water, the reported amount of fluorine in the water cannot be taken as the criterion for the amount taken in the system, as in intensely hot climate much larger quantities of water would be imbibed and hence a much larger quantity of fluorine would be taken into the body."

Here is admission that harm occurs at fluoridation levels as well as recognition that total dosage depends on amount of water consumed as well as its fluoride concentration. Although adjustment of optimal levels for climate and season is possible, adjustment for individual differences in water consumption is not, when water supplies are

Broken Main Reveals 6,000 ppm Fluorides



This is a Photographer of a burst water main taken December 1, 1960, by Photographer Hal Roth, 1132 Kirkham St., San Francisco 22, Calif. In a letter accompanying the photo sent April 11 to Col. Braly, Orinda, Mr. Roth said in part: "The enclosed photo is one I took the morning I met you in the 2700 block on 34th Avenue in San Francisco, December 1, 1960. This is the section which caused the trouble, and had been pulled out by the repair crews.

LABORATORY ANALYSIS

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Madge taken from broken water line

Fluorides as Y

2,500 ppm

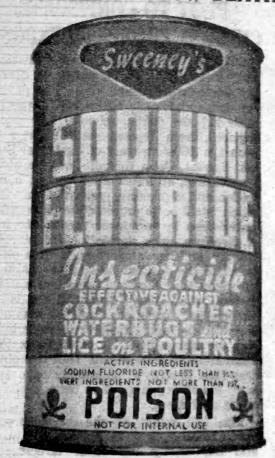
Residue soreped from places of tile

Fluorides as F

6,000 ppm

GRIFFIN-HASSON LABORATORIES

FLUORIDE - SLOW DEATH



Sodium fluoride is incorporated in many powders designed to kill cock-roaches, mice and rats. At one time it was used as a food preservative, but it is much too dangerous for this purpose. Many cases of poisoning of human beings by sodium fluoride have been recorded.

the vehicle. Nesin (33) (34) (38) gives evidence that human water consumption may vary between 1 and 20 quarts daily. The normal range for adults is thought to be 1½ to 8 quarts (39), with the comparable figures for children running from a few ounces to over 2 quarts (34) (40) (41). Obviously, consumers of large amounts of water are penalized under water fluoridation. Further the foolishness of regarding any fluoride concentration in water as optimal for all persons is evident. In this regard, Cox (42) asks a pertinent question: "A very important fact remains to be established, one now guessed through certain faulty assumptions: What is the optimum amount of fluorine, and I mean the true optimum, not an arbitrary one, for conferring caries resistant teeth to children of various ages." Cox may as well have said that such an optimal figure is nonexistent.

Studies purporting to prove the safety of artificial fluoridation necessarily have been pursued in naturally fluoridated areas, since artificial programs have not operated long enough to answer questions about chroniccumulative action. Exner (6) (35) (8), Waldbott (8) (32) and Rapp (26), among others, demonstrate differences between natural and artificial fluorides. The exact composition of fluoride, as it occurs naturally in water, is unknown. We do know that fluorides naturally are found in harder waters, associated with calcium, a known inhibitor of deleterious effects of fluoride ions. It seems likely, then that artificially fluoridated, softer waters will not affect humans in the same manner as harder, naturally fluoridated waters. Therefore, studies of effects of natural fluoride water probably can establish nothing reliable for artificially fluoridated water. Rapp (26) inquires: "What is the response of the body to fluoride that is not accompanied by the other mineral substances found in natural fluoride waters? Do these other substances limit or augment the effective activity of the fluoride even though they do not affect its concentration? When these questions have been answered . . . then only can we say that fluoride therapy is out of the experimental stage.'

The Report of the St. Louis Medical Society (43) assures us as follows: "There is no published record of any injury to the health

of any person drinking naturally fluoridated water with concentrations as high as 8 parts per million, nor of harmful effects at such lesser concentrations as occur naturally or are provided in fluoridation programs." Published information completely discredits this statement. The editorial quoted to begin this section refutes both implications. In addition, this discussion will include several instances of harm, not only at much less than 8 ppm but also at less than the 1ppm thought optimal for some localities.

Some consider the safety of fluoridation up to 8 ppm established by the Bartlett-Cameron study (44). Many seriously question this: Exner (6) (8) (35), Waldbott (8) (32) (45) (46), Klerer (47), Nesin (33), etc.

It is difficult to fathom the reasoning employed in picking Cameron (0.5 ppm F) as a "control" city for Bartlett (8 ppm F) if high rates of water consumption for Texas are considered. This is not a comparison between a fluoride-free and a high-fluoride city. The 1953 examination team was composed of entirely different people than the 1943 team. Fluoride levels were inconstant. A high incidence of symptoms of fluoride

poisoning was observed: increased bone density, coarse trabeculation of bone, hearing impairment, cataracts, abnormal WBC counts and sedimentation rates. "No published record of harm" resulted since all these findings were dismissed as "insignificant." Similarly termed "insignificant" were the 3½ times greater death rate in Bartlett and the higher incidence of periodontal lesions and missing teeth. Strangely, no comparisons were made between the findings in these cities and national averages for non-fluoride cities.

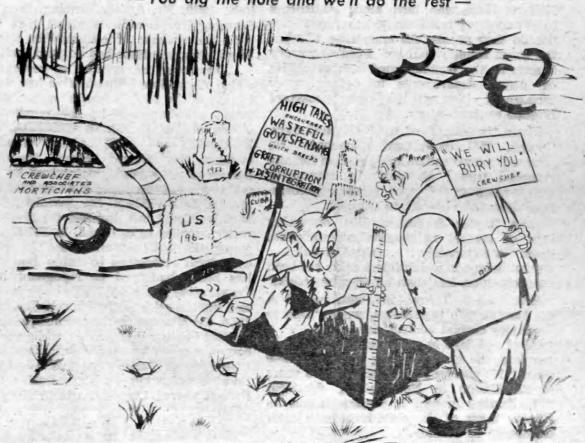
CASES OF HIGHER DEATH RATE

Also failing to demonstrate safety for fluoridation are the mortality statistic comparisons in the 32 paired cities (48) and the Illinois survey (49). In the case of the 32 cities, 5 more deaths per 100,000, observed in fluoride areas, was "insignificant." In the Illinois survey, 98 more deaths per 100.000 seemed "insignificant" to evaluators. Nesin (33) says the erratic nature of these surveys is such that a death rate of 600 per 100,000 is insignificant. We have already noted that studies of naturally fluoridated areas prove

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-SABOTAGE

Please check the back of our enclosed business card. If it is not blank on the reverse side, it may be a phoney—being circulated by a mail order printing firm. May we suggest that you give no encouragement to these subversives by requesting more "Bury you gently" business cards or additional copies of this timely newsletter.

Yours to the bitter end, Crewchef

FLUORIDATION

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Continued from page 3 -0-

nothing relative to artificially fluoridated places. Since mortality statistics rarely, if ever, list chronic fluorine intoxication as a disease entity, and since physicians generally know little of the symptomatology of fluoride poisoning, the value of mortality statistics in proving anything about it seems slight.

Little attention has been paid the 10 year study of Weaver (50), in Tyneside and Sunderland, England, where a higher death rate was found in the fluoridated (1.4 ppm) city for every year of the 10. Also disregarded are the high death rate in Grand Rapids (51) compared with non-fluoride Michigan cities and the 150% higher still-birth rate attending fluoridation of New Britain, Connecticut (52). The 400% jump in the thyroid cancer incidence following fluoridation of San Francisco has certainly not been stressed by proponents trying to establish the safety of fluoridation.

Ford (8) issued a statement as Water Commissioner for New York City in 1956: "The problem of managing the controls of dosage of fluoride chemical to obtain uniformity throughout a grid-work of more than 5000 miles of pipe and tunnels involving different sources and pressure gradients, as in the New York System, is formidable. None of those who have made statements to the contrary has ever had the experience nor do they possess the knowledge of what the exact result would be." Ford's accuracy is seen in the demonstrated lack of ability water departments to deliver water throughout cities with even nearly constant fluoride concentrations.

Those "in control" of the De Kalb County, Georgia (54), experiment remarked: "No constant concentration was observed for any extended period of time." In attempting maintenance of 0.7 ppm, actual concentrations observed were 0.1 to 1.0 ppm.

Spitz, Taylor & Harris (55), discussing lack of control of fluoride concentration, state: "unfortunately... (these cities)... are not unique in which fluoridation has been functioning on less than an adequate basis."

Erlenbach & Tracy (56), with regard to the New Britain experiment, write: "Due to conditions beyond control, there were . . . a total of 284 days in which no fluorides were fed into the system during the past three years." No wonder Kania (12), after 6 years of fluoridation in New Britain, declared: "The damage present in permanent and deciduous teeth of the child is in most cases impossible to remedy."

Feldman (57), after 4 years of fluoridation in Morristown, where the effort was to maintain 1.2 ppm, reported actual values taken at various points throughout the city as ranging from 0.0 to 0.41 ppm. Morristown discontinued fluoridation.

IMPOSSIBLE TO MAINTAIN PROPER DISTRIBUTION

No matter how easy maintenance of constant uniform fluoride concentration throughout cities is said to be, actual experience shows the fallacy of such belief.

Corrosion of fluoridating equipment has been reported, among other places, in Sche-

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Common Sense *

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nectady and Fulton, New York; San Francisco and Martinez, California; Sheridan, Wyoming, and Coeur d'Alene, Idaho (8).

Water supply men (8) have warned of fluoride sludge build-up in pipe and conduit linings with subsequent high concentration fall-out (drop-out) at points where sudden flow velocity changes occur. The Meadow-brook Soft Water Laundry, North Andover, Massachusetts (58), received the "benefit" of fluoride sludge in laundry tanks which, on analysis, had 300 to 2000 ppm F. Analysis of sludge in water mains in North Andover showed up to 36000 ppmF.

More recently, Concord, New Hampshire, discontinued fluoridation. An interdepartment communication (59) from the Water Pollution Commission, showed sludge analysis in Concord water mains to run between 1693 and 4491 ppm F—a safe condition by no stretch of the imagination.

(To be continued in Issue No. 424. The entire Bibliography will also be run in the same issue).

Fluoridation Abroad

European and Commonwealth nations which followed the American lead have learned nothing, through official quarters promoting it, of the dramatic reversal in the U.S. of this incredible programme of compulsory dosing. In a statement made on 9th Feb., 1959. Mr. Arthur Fleming, then U.S. Secretary for Health, admitted that 'since 1953 the number of communities starting fluoridation programs has dropped each year . . Moreover the number of communities which discontinued fluoridation has steadily increased.' In 1955 some 500 cities had rejected or abandoned it; the number now stands at over 1,500. In CANADA, NEW ZEALAND and AUSTRALIA, as adverse evidence has filtered beneath the official curtain of propaganda, maintained by Press and radio, communities have voted out fluoridation. In SWEDEN the Swedish Administrative Court has declared fluoridation of water supplies to be illegal, In EIRE an Act giving dictatorial powers to the Government over local authorities to apply fluoridation has been challenged as repugnant to the Constitution. In FRANCE, although a Bill was introduced into the French Chamber in 1954, the Ministre de Sante Publique and the Institut Pasteur disapproved, while the final coup was given by Prof. Fabre, Dean of the Pharmacy of Paris, who gave a lecture on fluorine poisoning on the occasion of the French Dental Day in Paris in November, 1954.

Intelligence Bulletin, Cambridge, England.

"DO IT YOURSELF" REVERENDS

We were a little suspicious about all these Reverends marching on Washington until Congressman Ayres checked some costumesfor-hire firms in New York who admitted they were busy making clerical suits for weeks and that they could not keep up with the demand even though the rental price went up from \$10 to \$50. To what extremes these communists go!

Reading Material On Fluoridation

The American Fluoridation Experiment By F. B. Exner, M.D. and G. L. Waldbott, M.D. The Drama of Fluorine: Arch-Enemy of Mankind \$4.00 -By Leo Spira, M.D., Ph.D. Fluoridation: The Crime of the Century By J. A. Campbell Fluoridation Unmasked By Fanchon Batelle Say "No" to Poison-Fluorine in Your **Drinking Water** By Citizens Committee Against Fluoridation, La Crosse, Wisc. 50 for \$1.00

Order from— Christian Educational Association Union, New Jersey

PLOT TO CONFISCATE CHURCH PROPERTY EXPOSED

A group known as "Other Americans, Inc.," headed by Mrs. Madalyn E. Murray, the nondescript atheist whose suit provided the occasion for the outlawing of the Holy Bible in our public schools, has recently acquired, from former state Senator Carl Brown, a 160-acre tract of land near Stockton, Kansas. Upon this site will be erected a university, an information center, a radio station and a printing press, the purpose of which "shall be to promote the philosophy of materialism by whatever means the board of directors may decide." No doubt, Mrs. Murray and her supporters, in this plot to complete the de-Christianization of America, will deny that they are communists. Nevertheless what they cannot deny is that materialism forms the basis of communist doctrine. In fact, "dialectical materialism"; was the name given by Karl Marx to his Talmud-inspired manifesto. Thus it is obvious that Mrs. Murray's "philosophy of materialism" is nothing more than blatant Marxism or its equivalent.

The full extent of the danger posed to our Christian way of life by this woman and the anonymous cabal directing her actions can hardly be exaggerated. Emboldened by their assaults on the school system, this clique of atheists, has now set itself the task of totally obliterating the Christian churches. Seemingly certain of success, they openly proclaim their intention to bring a series of legal attacks against the tax exemptions granted to religious bodies. It does not require much foresight to predict the disastrous results which would occur if these maneuvers are successful. Once the exemptions are removed, the socialist bureaucrats would then be free to impose enormous assessments on the churches, thus opening the way for seizure of church property on the pretext of nonpayment of taxes. Make no mistake, this is the ultimate aim of this vile organization as well as an important step in the scheme to destroy our nation. It is of the utmost necessity that every effort be made to combat this danger.

"Common Sense" calls upon its Kansas readers not only to sound the alarm, but to take their place in the vanguard of the battle to remove this pestilence from the soil of their beloved state.

This is a struggle which lays bare the fundamental conflict so often obscured beneath the clouds of mere politics. For it must be borne in mind that the disorders let loose on the world during the course of the past two centuries do not have as their purpose the replacement of one economic or political system by another. Communism, liberalism, socialism, and the dark forces of international finance all have as their underlying and unifying purpose the ruination of Christianity and the mongrelization of the races.

It is not too late to win this fight. Recent events have served to awaken many previously complacent Americans, and the opportunity to rid our nation of the cancer of liberalism and Marxism has never been better. The patriots of Kansas can achieve an epic victory defeating the hellish aims of "Other Americans, Inc."

Infiltrate the Churches

"It is significant that the Communist Party, more than any other group, has been able to achieve successful united fronts with church groups on the most important issues of the day. This is not due to any compromise with religion as such, on our part. In fact, by going among the religious masses, we are for the first time able to bring our anti-religious ideas to them."

-Earl Browder, Communist Party leader for 16 years

READ AND PASS ON